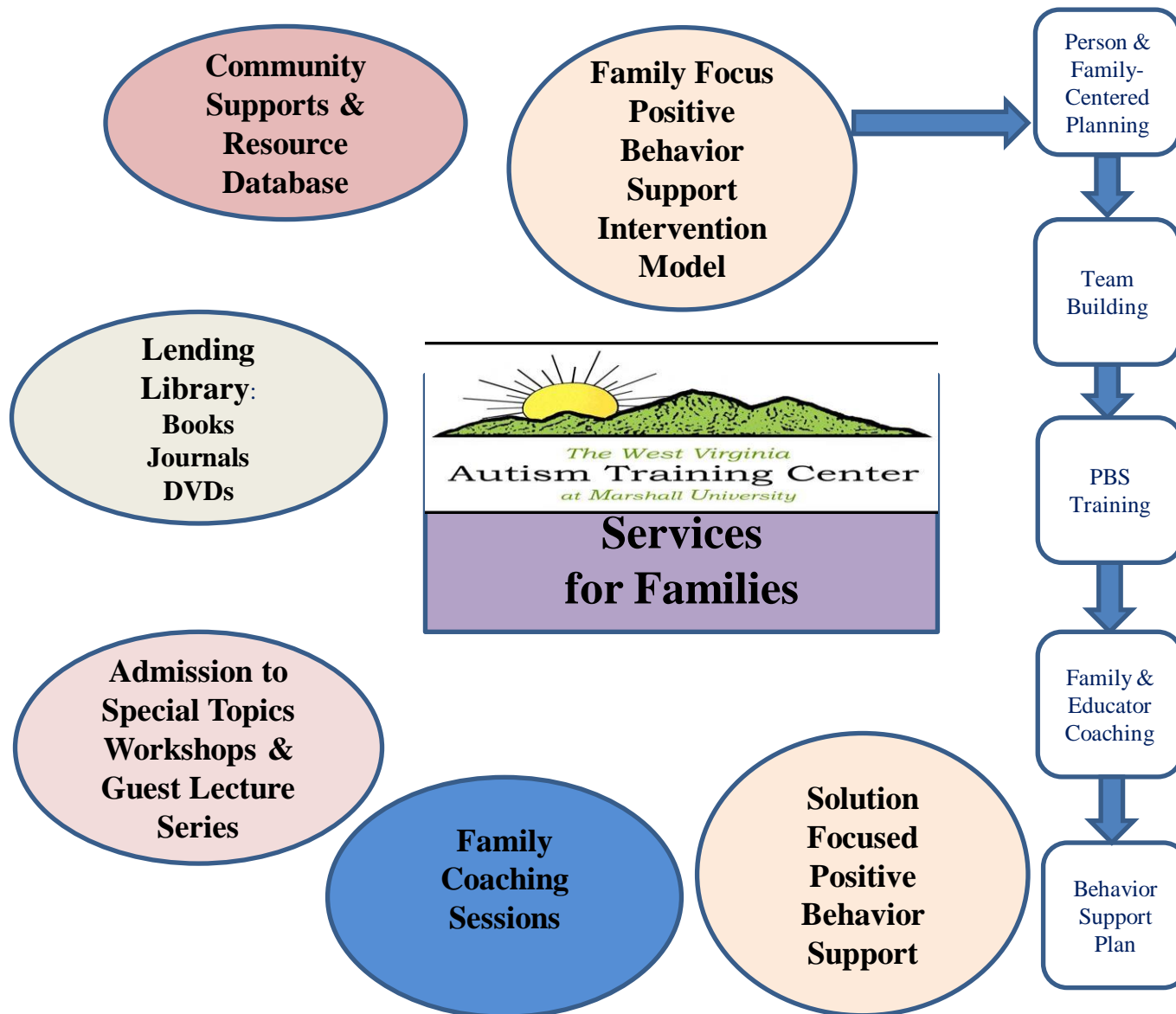
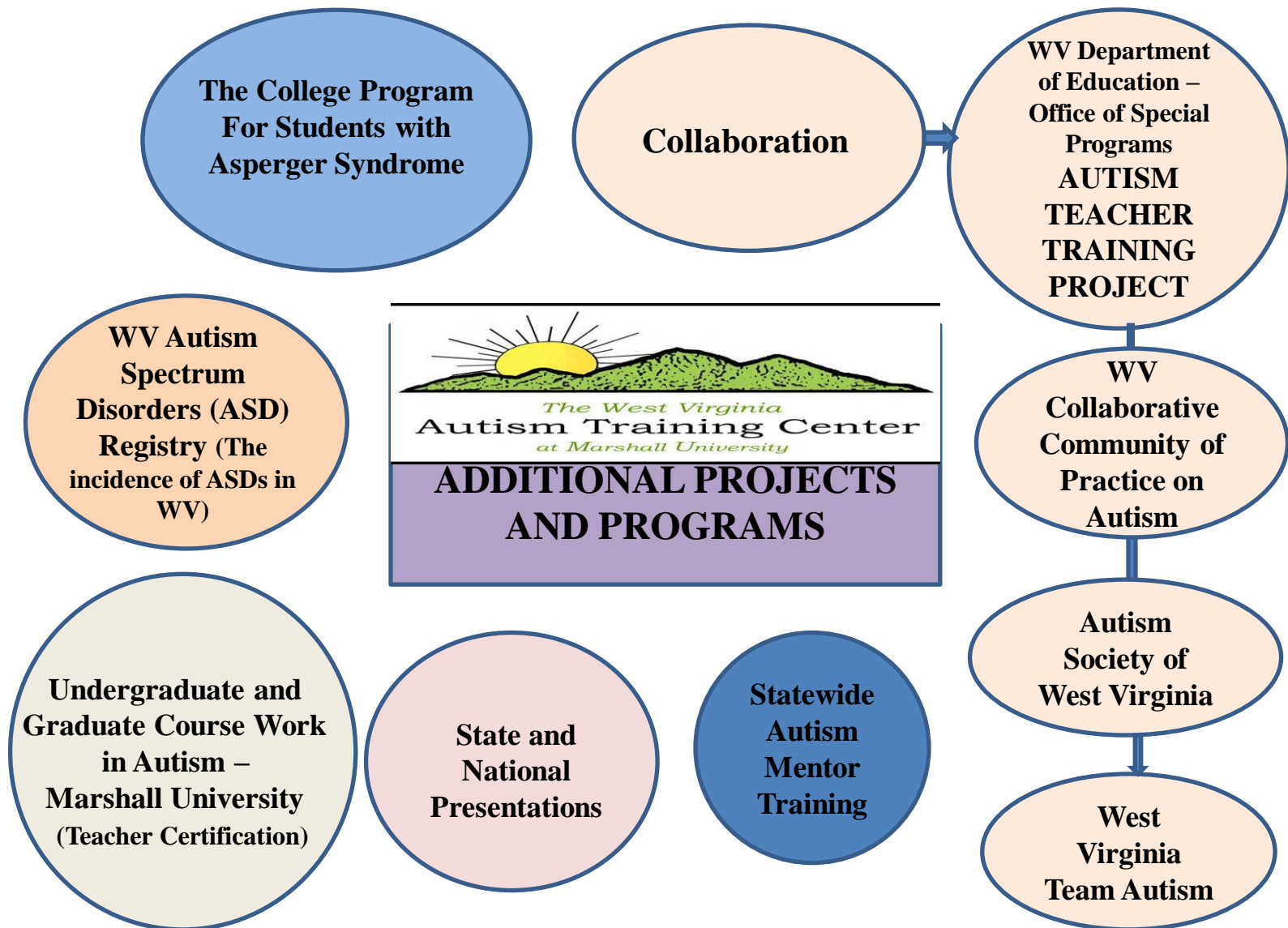


Asperger's Disorder: *Developing a Therapeutic Relationship*

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Learner Outcomes

- o Recognize challenges that exist with traditional talk therapy for clients diagnosed with Asperger's Disorder.
- o Learn specific techniques that can establish a therapeutic relationship, and counseling and skill-building strategies that can help improve quality of life for clients with Asperger's Disorder.
- o Understand that despite commonalities that exist within the spectrum, those with Asperger's Disorder experience life from individual perspectives. One approach does not fit all.

MH Issues Related to Common Characteristics of Asperger's Disorder

Common Challenges That May Affect Mental Health & Life Quality

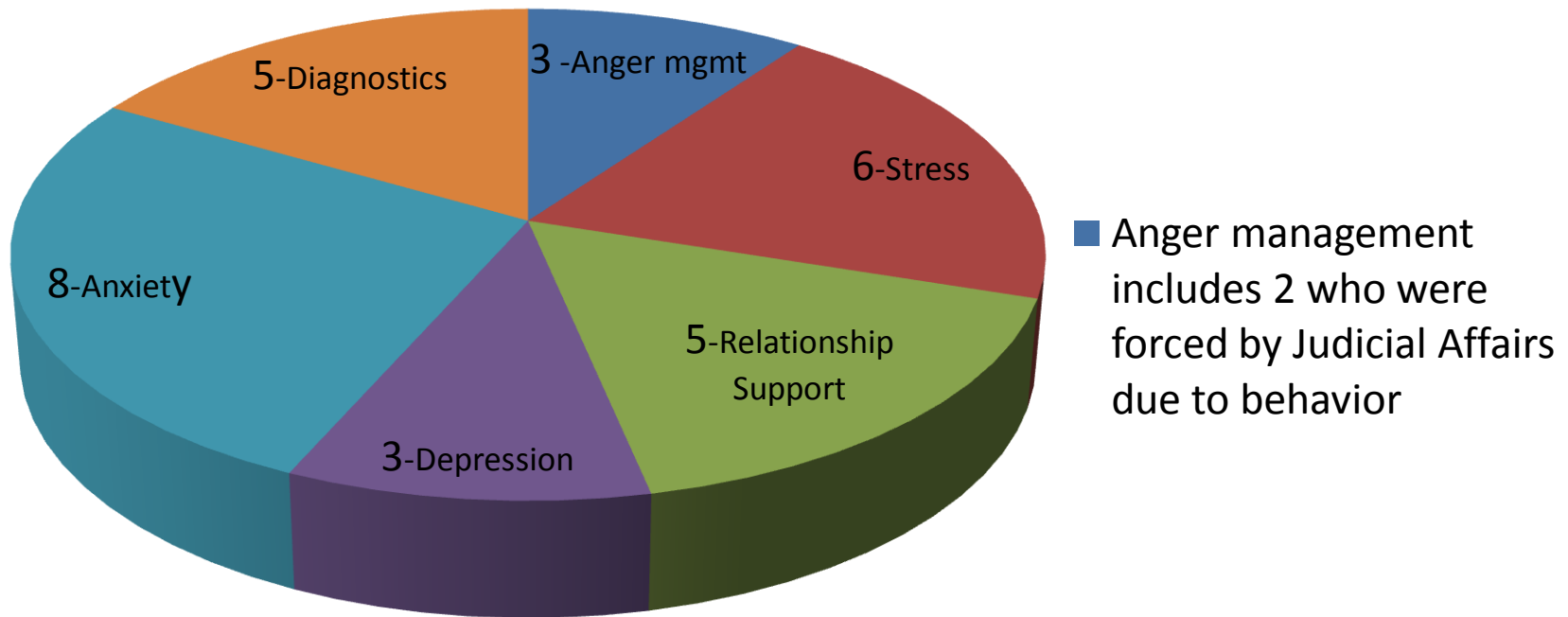
- Executive Dysfunction
- Challenges with Social Communication
- Social Skill Deficits
- Challenges with Communication
- Challenges related to Theory of Mind

Each Challenge Can Create A Need For Therapy Because They May:

- Alienate those who might otherwise become part of a typical social network
- Lead to significant day-to-day anxiety and distress
- Cause misunderstandings in school and at work that affect reputation
- Lead individuals to use or abuse substances that help them relax and decrease distress
- Cause legal and / or financial troubles
- Demonstrate vulnerability to bullies
- Exacerbate relationship problems
- Create anxiety or distress over gender and sex roles

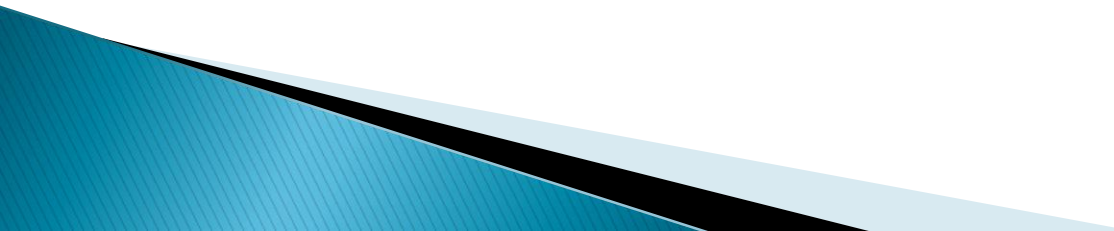
Reasons for MH Treatment 2002-2012 Marshall University

(n = 30)



Mental Health Counseling and Asperger's Disorder

(VanBergeijk, Klin, & Volkmar, 2008)

- Insight-related mental health services likely to have limited success with students living with ASD; psychoeducational is typically a more effective approach
 - Directive counseling is a necessity, as students require information otherwise lost due to challenges with social learning and social communication
 - Counseling that focuses on skill building should be conducted in rote, sequential steps, and make heavy use of techniques such as role play and coaching. Embed efforts to let skills be generalized
- 

Challenges to Traditional Counseling: *Communication*

- ▶ “Psychotherapy is the process of engagement between two persons, both of whom are bound to change through the therapeutic venture. At its best it is a collaborative process that involves both the therapist and the client in co-constructing solutions and concerns.” (Corey, 2005)

1. Counselors are typically trained to talk *with* clients; many clients with Asperger’s Disorder talk *at* therapists through monologues or fact-reciting
2. Clients diagnosed with Asperger’s Disorder are good at reporting facts, but generally struggle with reporting emotional or subjective content:

“During our second meeting Elsa told me her first story about her imaginary friend, Josie, who was seven and came to visit wearing cowboy boots and riding a black motorcycle. [Elsa reported] how much fun they had running around, digging ditches and climbing the crab apple tree in her backyard. She went on to proclaim that Josie had a favorite color: Black”

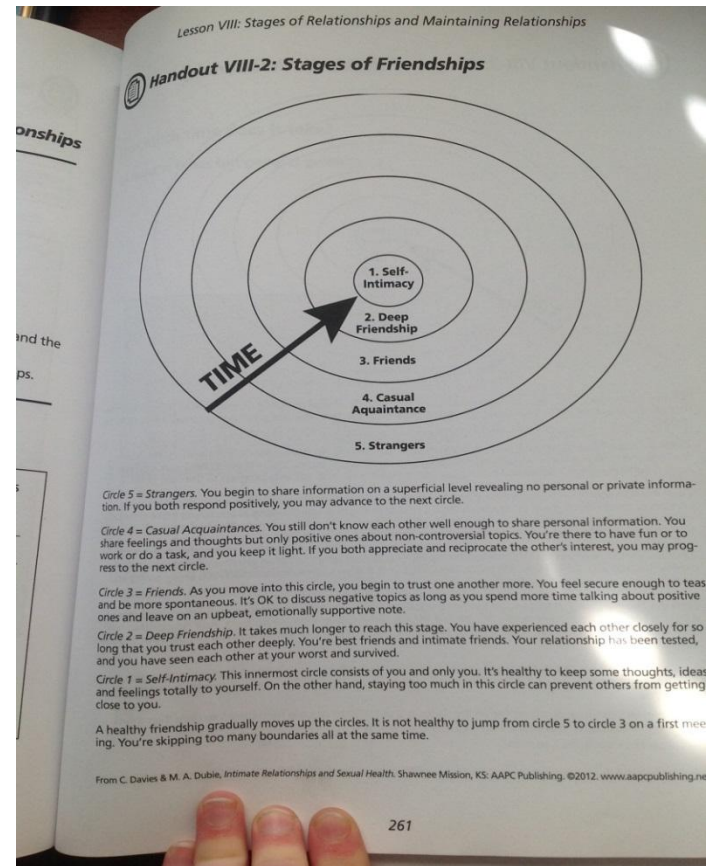
“Black,” I responded. What do you like about black?” She did not reply.” (Shaft, J.P., 2011)

Challenges to Traditional Counseling: *Insight Development*

- ▶ Professionals who support those with ASD have traditionally approached issues from a behavioral perspective, and have not commonly addressed emotional or cognitive needs
- ▶ “Therapist are not in the business to change clients, to give them quick advice, or to solve their problems for them.”
(Corey, 2005).
- 1. Challenges related to Theory of Mind create the need, at times, to be more directive than many therapists are trained to be.
- 2. Skill-building sessions often take priority over more common insight-oriented therapy

Session 6: Relationship Traits and Timeline

- John explained that he hung out with a girl 3 times since our last session.
- I asked him to rate where he felt they were on the romantic relationship scale. His answer: “2” (Deep Friendship)
- I then rated where I thought she probably felt their relationship was: “4” (Casual Acquaintance) on the Friendship scale. John was shocked.



Challenges to Traditional Counseling:

Typical Timelines

- ▶ One of the most important instruments you have to work with as a counselor is yourself as a person.

1. A professional understanding of common symptoms of Asperger's Disorder is vital; otherwise, the communication challenges, challenges with insight, difficulties with rapport, etc. may be overwhelming to the therapist.

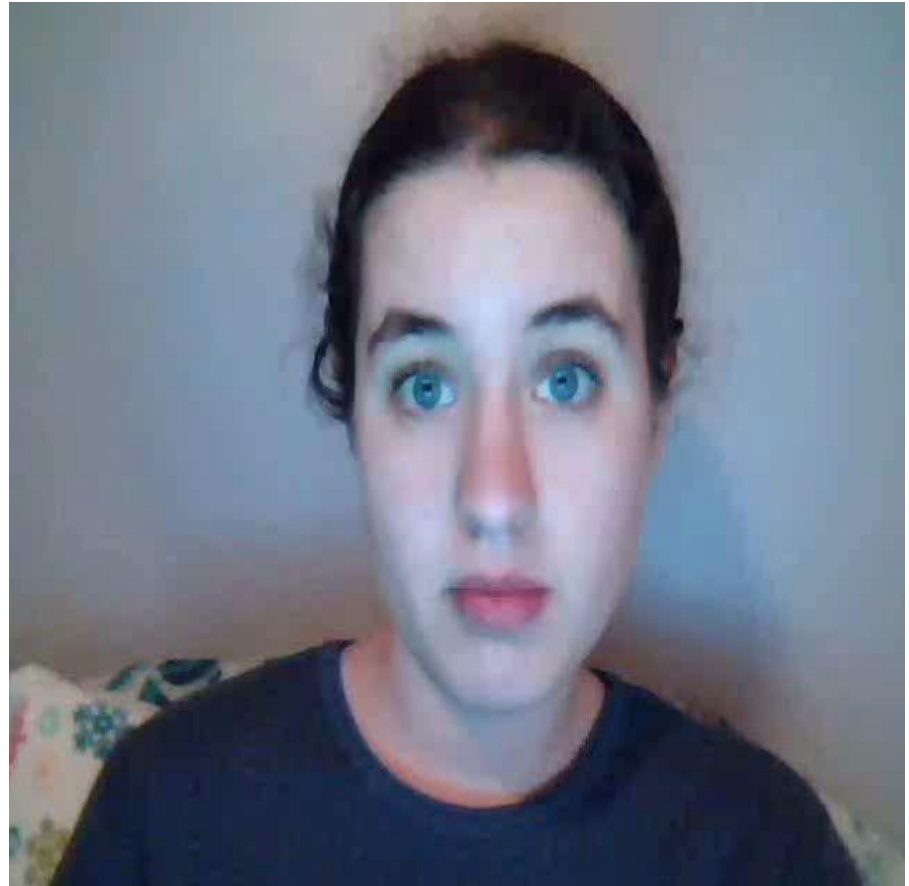
“Despite the certainty of my therapeutic stance, I regularly became uncomfortable with her fantasies and found myself wanting to talk to her as a real girl named Elsa. I would get ahead of myself and want her to be in the room with me as a person, forgetting where we were on establishing a therapeutic spot where she would not be so freighted by being engulfed by her anxiety. Her capacity to use language and logic made it difficult to remember how vulnerable she was to her affect. I also felt vulnerable to feeling overwhelmed by the fragility of our relationship.” (Shaft, J.P., 2011)

- ▶ **Traditional Therapeutic Relationship Timeline:**

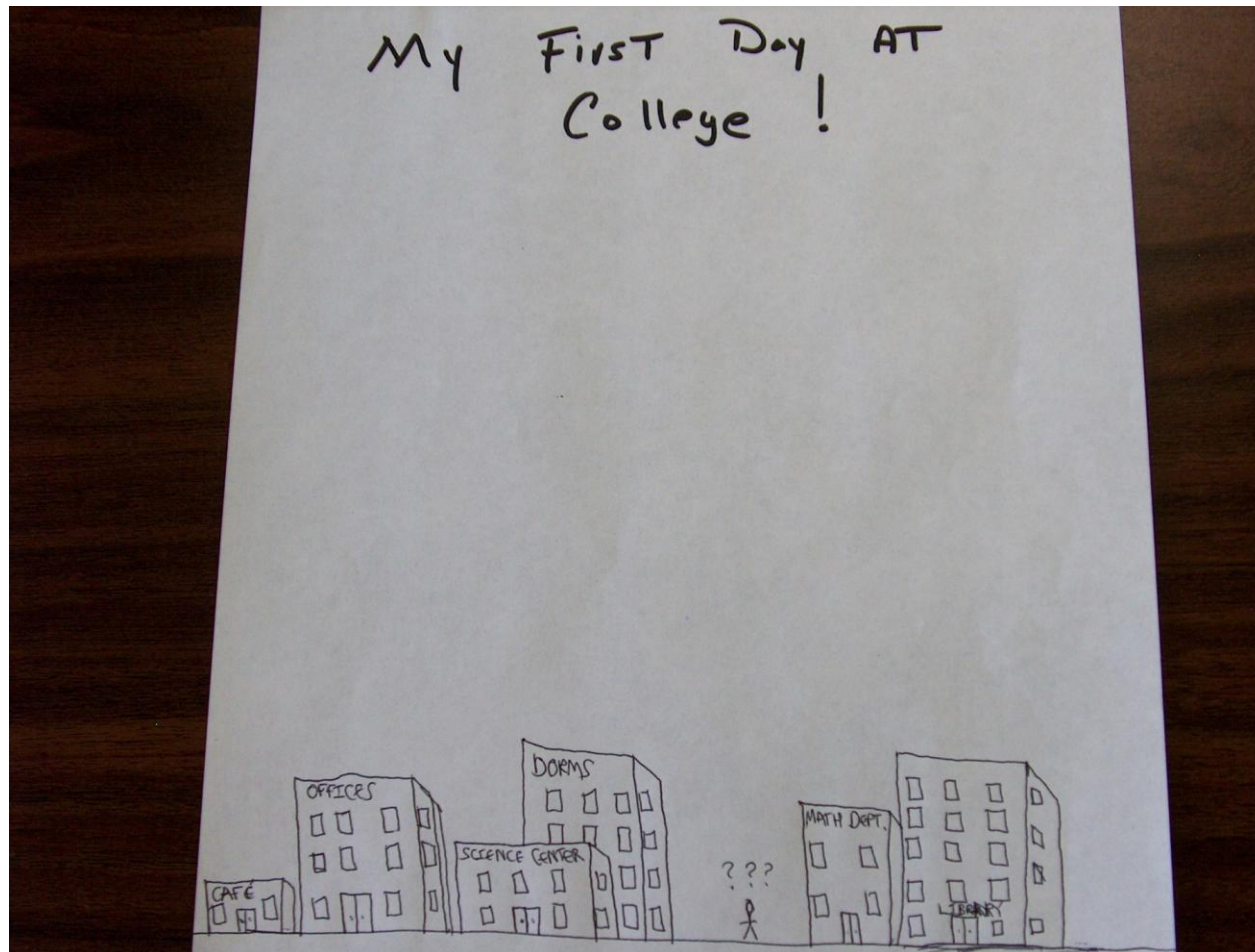
<i>Initial Stage</i>	→	<i>Working Stage</i>	→	<i>Termination Stage</i>
(rapport/bonding/assessment)		(focus on goals/tasks)		(Effectively planned)

Keys To Building A Therapeutic Relationship

A Safe Environment and Opportunity To Monologue



Keys To Building A Therapeutic Relationship
Use Visuals To Communicate Emotion Or
Abstract Concepts



Keys To Building A Therapeutic Relationship

- Give obvious, demonstrative feedback – no subtle hints! Avoid metaphors
- Self-disclose in a respectful, responsible way if you understand something they are going through. Many with ASD mistakenly think their experiences are unique to them
- Appeal to their intelligence and logic when attempting to challenge perspective
- Identify strengths, and work with those to establish rapport and to learn skills

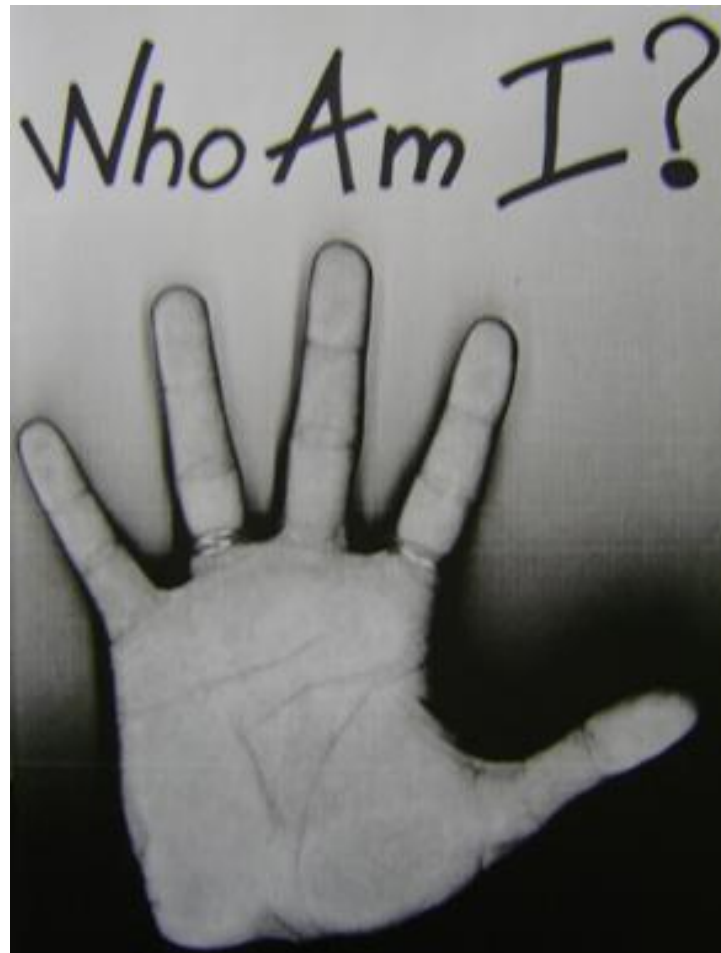
Keys To Building A Therapeutic Relationship

Provide Information and Detail To Aid Skill Building



- Often best received in visual format
- Best when developed collaboratively with the individual
- Don't presume topics or skills are already learned

Keys To Building A Therapeutic Relationship:
Work Together To Make The Abstract Concrete



Building My Reputation On Campus

Living on campus can be both fun, and challenging. While it's fun to live alone, I often must rely on myself to be focused and organized.

Living on campus with people I don't know can also be a challenge, so I know it's important to create a reputation of which I can be proud. For sure, I know I don't want to have a reputation as being loud, or difficult.

(Continued)

Building My Reputation On Campus (continued)

Instead, I want my reputation on campus to be:

- *Someone who is intelligent*
- *Dependable, trustworthy and respectful of others and the property of others*
- *Someone who is patient*
- *Someone who is thoughtful of the needs of others*
- *Someone who handles anxiety well*
- *Someone who handles unexpected change in a graceful, dignified way*

(continued)

Building My Reputation On Campus (continued)

Today, I'll work on building my positive reputation by:

Keys To Building A Therapeutic Relationship: Gently-Directed Self-Reflection



Morning Journal

As I prepare to start my day, I recognize that I:

_____ Feel calm, and enthusiastic about the day

_____ Feel somewhat calm, but with a controllable level of anxiety, frustration or other similar feelings

_____ Feel overwhelmed—or close to overwhelmed—and probably should do something that will help me relax, or call the College Program staff for advice or support

*** I understand that sometimes the unexpected can occur. Classes can be canceled suddenly, and plans that I have made can fall through for a variety of reasons. If unexpected events occur today, I will handle it by:**

*** Staying focused is important in helping me stay organized, and keeping my anxiety level low. One thing I plan to do today that will help me stay focused on my goals is** _____

Evening Journal

*** As I finish up my day, I realize that I:**

- _____ Feel calm, and enthusiastic about the day
- _____ Feel somewhat calm, but with a controllable level of anxiety, frustration or other similar feelings
- _____ Feel overwhelmed—or close to overwhelmed—and probably should do something that will help me relax, or call the College Program staff for advice or support

- **One thing that occurred today that I did not expect was:** _____
-

*** I handled that unexpected event:**

_____ Very well! _____ Pretty well _____ OK _____ Not so well _____ Poorly

*** If I had the event to do over again, I would do it:**

1. The same way
2. Differently, and here's how: _____

Keys To Building A Therapeutic Relationship:

Genuine, Unconditional Acceptance of the Individual and
the Aspie Culture

The text 'ASPIE POWER' is rendered in a bold, 3D, gold-colored font with a metallic sheen and a slight shadow. The letters are thick and blocky, with a slight gap between the two words. The text is centered on a light yellow rectangular background.

Case Study:

Solution-Focused Intervention and Support

Jake

Summer, 2011

Background

- 8 year old male
- Lives at home with father, mother, one younger sister
- Family highly educated, very family focused
- Attends regular education classroom in neighborhood school
- Diagnosed with Asperger's Disorder in Spring, 2011
- Demonstrates very concrete thinking and obsessive-compulsive behavior; tantrums suddenly and for long periods; is highly anxious socially; becoming increasingly pessimistic

Background

- Registered with WV ATC immediately after diagnosis
- Completed action plan with WV ATC Intake Coordinator
- Family began using WV ATC library and reading anything they could by Tony Attwood and other experts on Asperger's Disorder
- Began seeking out community based services
- Family noticed possible sensory challenges with noise, so became involved with an OT center in early summer.
- During early summer, tantrum behavior increased. Jake started asking "*Am I the only kid at my school with Asperger's?*"
- Anxiety and distress seemed to worsen, began using language that suggested suicidal ideation. Comments increased in intensity and occurred regularly.
- Parents make an appointment with a child psychiatrist in their hometown. When called to confirm appointment the day before and mention "Asperger's syndrome" during discussion, told "*The doctor doesn't see anyone with a diagnosis of Asperger's. It has to be a mental health issue only.*"
- Mother called WV ATC unsure where to turn, scared, and feeling hopeless.

Telephone Intake

- One hour on telephone with Jake's mother, listening to examples of suicidal ideation-sounding language. Discovered:
 1. Despite this behavior being observed for months, no attempt to harm himself or others ever occurred
 2. No attempt to gather or hide knives or guns ever occurred, nor did any effort to use objects as a weapon
 3. The disciplinary tactics used by parents were ineffective to stop the comments
 4. His mother suggested, and I agreed, that he likely was using the language as a script to express frustration. No one in the family believed he would harm himself or others. But the extreme language and inability to get psychiatric help made it overwhelming to the family. They were desperate for help
- **I explained SBIS, that it was new and untested, but could pilot it with Jake. The family agreed**

Baseline Data

- Jake's mother kept a detailed journal of behavior or comments that could be interpreted as suicidal. Journal included antecedents, the behavior, and consequences.
- During 14 day baseline, 7 incidents of suicidal-sounding comments were made.
- Most incidents were at the conclusion of a long-lasting tantrum, and appeared crafted:

“Since I don’t know how to work a gun, I’m going to go to college and learn how and then I’ll kill myself. And it’s because you all hate me!”

Antecedents

- ✓ Sudden instruction to do something, such as “clean up your room,” or not doing something he expected to do, such as not swimming as planned due to thunderstorms
- ✓ Uncertainty (TV remote incident)
- ✓ Reaction to an exasperated sigh from his mother after he just insulted his sister
- ✓ Reaction to his sister telling on him for various things (Good Guy/Bad Guy game)
- ✓ Reaction to intense debates with his sister

Consequences

- ✓ Reassurances, explanations and reminders
 - ✓ Time-Out
 - ✓ Grounded to his room
-
- Parents report the consequences sometimes helped him eventually calm down, but didn't provide any proactive help for him to learn and use new ways to express his frustration

Session 1: Rapport Building, Needs Assessment, and Solution

Statement

- Time Spent: **2 hrs**
- Met at Jake's home. His mother, father, and sister were in attendance and participated fully
- Because he loved the TV show America's Got Talent, had him draw "**Your Least Favorite AGT Act.**" Spent first 20 minutes discussing the show, and why this act was terrible. It was a good bonding experience, and it helped him feel comfortable with drawing.
- He did all the drawing for his Circle of Support and other pictorial data

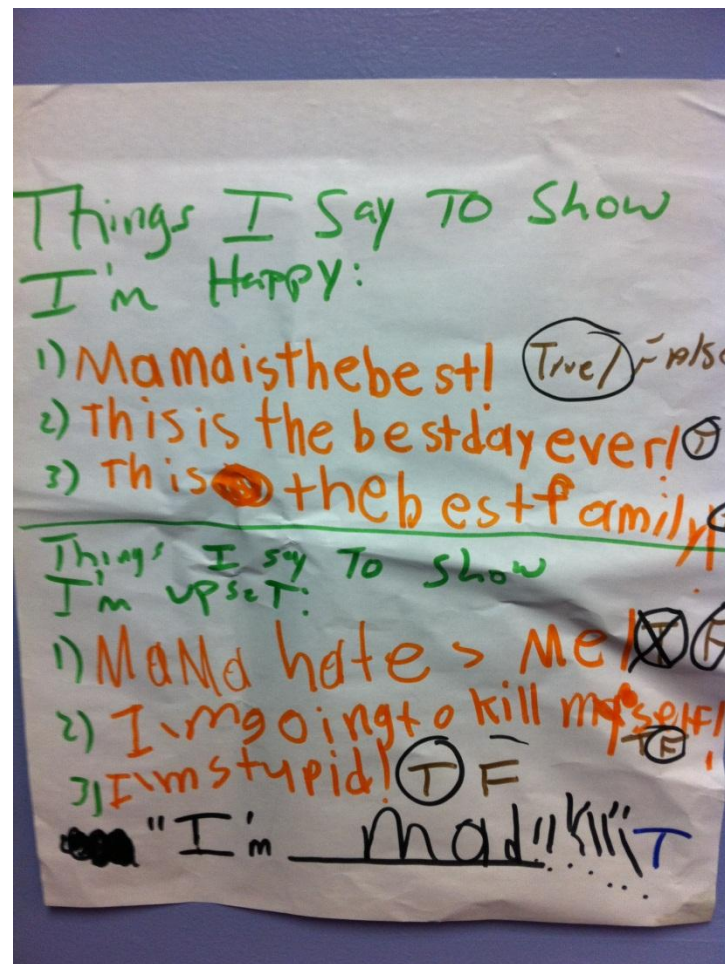


Session 1: Rapport Building, Needs Assessment, and Solution Statement

- Did not do a “Dream” frame in order to keep the focus on more immediate concerns
- **Strengths that will help Jake thrive:**
 - Variety of interests, including music. Recently discovered Billy Joel and Tom Petty music and is now serious fan of both
 - Articulate and able to express ideas to others
 - Loves acting in home-made commercials he and his father make
 - Significant interest in teaching: makes lesson plans and teaches lessons to family 3X or more weekly
- **What needs to be in place for Jake to thrive?**
 - Overcome, or manage, shyness
 - Overcome extreme level of anxiety
 - Improve ability to give emotional information to others
 - Improve ability to handle transition and resulting frustration
 - Reduce obsessive thoughts and the effect they have on him emotionally
 - Tell others what he needs proactively, and without resorting to language that scares people

Session 1: Rapport Building, Need Assessment, and Solution Statement

- Gathered information about what makes him happiest, his dislikes, and his challenges. He titled each of the frames (Such as “*My Baaaaaadd Days*”) after a description from me about what the frame should contain. Explored his ability to rate “good” and “bad” feelings or perceptions.
- Tested theory that suicidal-sounding comments were scripts and not intentions of real harm
- Emphasized the obvious conclusion: that Jake was using “false expressions” to tell others what he needs rather than “true expressions.” He agreed. Began teaching him to exchange more “true expressions,” such as “*I’m mad,*” near the end of the session.



Statements

- Problem Statement

“[name] threatens self-harm and suicide when he becomes upset, distressed, angry, or disappointed.”

- Solution Statement

“[Name] will learn more truthful, socially appropriate, and effective ways to communicate distress, anger, frustration, and disappointment to others.”

Homework:

Homework: Asked Jake to work hard on “truthful expressions” of stress, and not “false expressions” of stress.

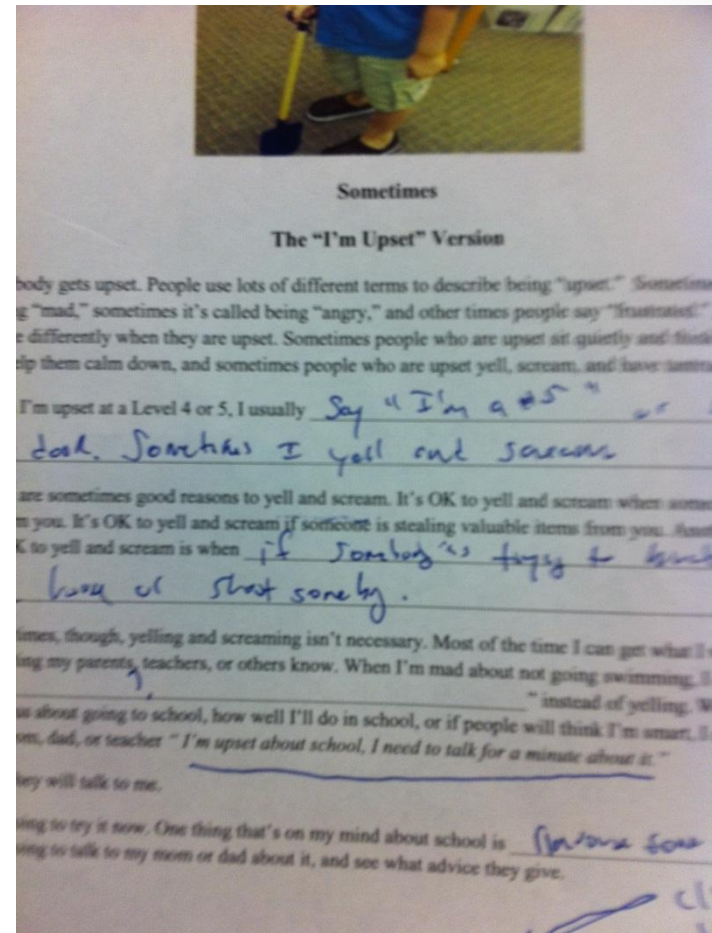
Asked parents to continue their journal of antecedents, behavior, and consequences for suicidal-sounding communication

Session 2: Introduce Self-Regulation Scale and Distress Reduction Strategies

- 1 = I feel great and I want to keep participating in what I'm doing
- 2 = I am getting upset, but still want to continue
- 3 = I am becoming more upset, having a hard time concentrating and may need to relax
- 4 = I need to stop what I'm doing and relax now
- 5 = I can't control myself. I need to go to a calm place

Attempt at Developing Social Story Based on Stress Indicators

- He didn't want to write on it, so we talked through option and I wrote in the comments for him
- He was tentative with the story. He thought it was childish
- Despite his not fully participating, it was helpful in showing (a) that he didn't see himself as a typical 8-year-old child, (b) it generated detailed discussions about his current behavior, and (c) it demonstrated he did not know how to react when upset without yelling



Session 2: Continued

- Attempted to identify strategies that would help him relax at particular numbers, such as “Go to my room to relax” for a number 3, or “Tell my parents” when at number 4. But he seemed to struggle with the concept and this aspect was not overly successful.
- **Homework:** Asked parents to review this Stress Index with him daily, at least every couple of hours to familiarize themselves with it. Asked them to discuss solutions with him when he arrived at a #3 or higher, and reinforce “truthful expressions "of distress.

Data from Weeks 1 and 2

- Great reduction of suicidal-sounding comments: Only 1 such comment made after first session.
- While preparing for trip to Columbus Zoo early in the week he began to have a meltdown. His mother reported: *“I asked his number, he said ‘5.’ I asked how he could get to a 3, and he said he couldn’t. I suggested music, he asked to snuggle instead. So I sat and snuggled with him in his room for about one minute until he calmed.”*
- Later in the week while walking at the zoo, Jake suddenly yelled out *‘I’m at a 5!’* We asked what he needed, he said he was hot and tired. We sat on a bench and rested, and avoided a tantrum.”
- Near the end of the week his mother said he could read in his room. His father did not know this, and soon after told him to go to bed. Jake began to physically shake, tried to explain but couldn’t get the words out. He suddenly yelled out: *“I’m at a 5, Mom. Can you come here?”* She did, discovered what was going on and resolved the issue.

Session 3: Tom Petty Teaches Us Literal vs. Figurative Language

Running Down A Dream

5: Still testing, and providing alternative options



I won't back down."

- ☐ Literal interpretation
- ☒ Figure of speech

Means: It is a figure of speech that means I will not allow other people to bully me, or to do something I don't want to do.

"Free Falling"

- ☐ Literal interpretation
- ☒ Figure of speech

Means: Wandering randomly.

"Runnin' Down a Dream"

- ☐ Literal interpretation
- ☒ Figure of speech

Means: Trying to catch something and achieve it.

4. I'm upset and need to talk about something.

- ☒ Literal interpretation
- ☐ Figure of speech

Means: Literal

5. "I want to kill myself."




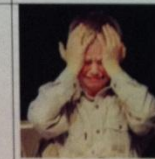

- ☐ Literal interpretation
- ☒ Figure of speech

Means: You're really mad.

Data from Week 3

- 0 incidents of suicidal-sounding comments
- Reports from parents that Jake is calmer, happier, and more proactively communicative about his concerns
- **Concern:** At this point, the family started talking about trying to reduce tantrum behavior, which still occurred (although more rarely and for smaller periods of time). I reminded everyone that our Solution Statement was focused on providing Jake with appropriate ways to communicate distress in order to eliminate suicidal-sounding comments. We didn't want to lose focus on that goal at this time.

Session 4: Develop Personal Stress Reduction Scale and Distress Reduction Strategies

#	Looks like this	Feels like this	Things to do at this number
1		Calm Peaceful Relaxed Mostly carefree	<ul style="list-style-type: none"> - Enjoy the feeling! - Participate in activities - Think about what it is at that moment that makes you feel a #1
2		Annoyed Nagging thoughts Anxious Nervous Worried	<ul style="list-style-type: none"> - Start an activity you really like - Write down what is bothering you - Discuss the issue with parents or teachers and ask for advice - Follow their advice - Remember what you do that makes you feel a #1
3		Really annoyed More nagging thoughts Starting to focus on single topic Increased worry <i>Can cause stomach & sleep</i>	<ul style="list-style-type: none"> - Switch to an activity you like if you can - Tell others you need a break, and get away by yourself for a short while - Write down what is bothering you - Discuss your thoughts or worries with your parents, or teachers
4		Increased heart rate Really focused on single topic Hard time thinking of choices Mad as heck!	<ul style="list-style-type: none"> - Tell others you need a break, and get away by yourself - Write down what is bothering you - Discuss your thoughts or worries with your parents, or teachers - Think about and list choices you have to change what is making you upset
5		Furious Angry Few or no choices Feel trapped Have to let out my emotions	<ul style="list-style-type: none"> - Tell others you need a break, and get away by yourself

- Jake and I developed this scale together
- We focused first on what these numbers “feel” like
- We then focused on “Things to do at this number” to alleviate the problems
- Color coded to indicate increasing stress levels; parents encouraged to use pictures of Jake in final product

Data from Week 4

- 0 reports of suicide-sounding comments
- Parents report he is using number system regularly and it has become a part of his— and his family's — daily communication.

Just wanted to send a quick note to say that the number rating thing is awesome! We're all using it as a family, and Jake is able to express himself more appropriately than before. The other day, out of the blue, Jake said, "It's so much easier to say, 'I'm a five,' than it is to say, 'Mama hates me.'" He still has his meltdowns, but he's certainly moving in the right direction.

Homework: The following week, Jake is to prepare and teach me a lesson on figurative vs. literal language. The only stipulation: it must contain at least one piece of information on an emotional issue, such as being upset or angry.

Session 5: Teach Me a Lesson

Name Marc Ellison
Date _____

Directions Do the math.

1. $24 + 80 = 104$ 2. $47 + 94 = 141$ 3. $97 + 85 = 182$
4. $37 + 65 = 102$ 5. $41 + 59 = 100$ 6. $20 + 27 = 47$
7. $99 + 99 = 198$ 8. $48 + 38 = 86$ 9. $57 + 80 = 137$

10. Directions Write about what you would do if your house was talking.

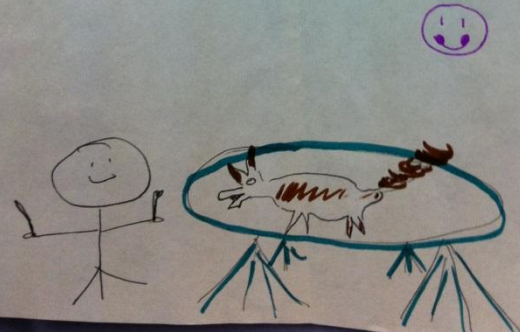
First, I would clean out my ears to make
sure I was hearing correctly. Then, I
would ask someone if they heard it too
if they said "Yes," I would RUN

Name Marc Ellison
date 8/24/11

Directions Read each sentence. Circle if its figurative or literal.

1. I'm so hungry I could eat a wolf. Figurative literal
2. I want an eraser. Figurative literal
3. That's a piece of cake. Figurative literal

4. Directions draw a picture of something that is figurative.



Re-Do

I Didn't Follow His Instruction

Name Mae Eliza
Date 9/24/11

Directions Do the math.

1. $24 + 80 =$ _____ 2. $47 + 94 =$ _____ 3. $97 + 85 =$ _____
4. $37 + 65 =$ _____ 5. $41 + 59 =$ _____ 6. $20 + 27 =$ _____
7. $99 + 99 =$ _____ 8. $48 + 38 =$ _____ 9. $57 + 80 =$ _____

10. Directions Write about what you would do if your house was talking. 😊 Great!

I would worry that I was imagining it, so I would go find someone to ask if they heard it too. If they said "no," I would be relieved knowing that I was just imagining it. If they said "yes," I would be really scared! I would call the police, or the fire department, or my parents to come help me. When they came to my house to help, I would feel happy!

Signature _____

He Didn't Follow Mine

- He didn't include any emotional-based questions, so I spent the final 15 minutes of the session having him catch me up on how he is doing.

Data from Week 5

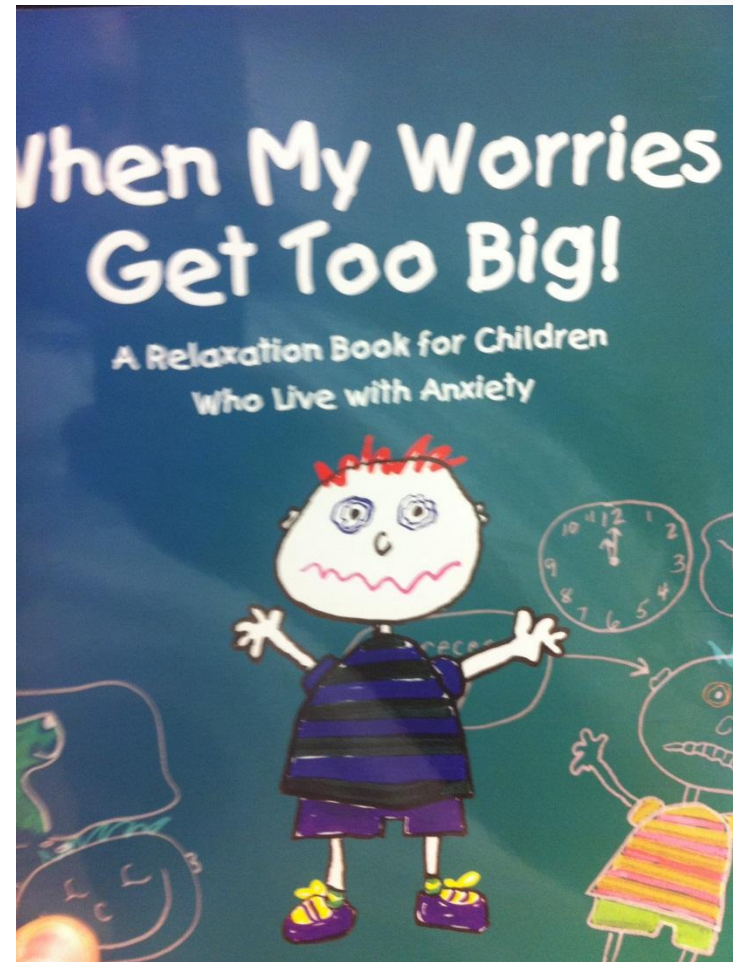
- 0 Incidents of suicide-sounding comments
- Parents report Jake has transitioned well into his new classroom, still uses the number system to describe his status, and his tantrums continue to be less frequent. In fact, no tantrums were listed in the journal kept by his mother this week (for the first time since the process began)
- **Homework for Session 6:** Make a 2 minute video on the appropriate way to initiate a friendly conversation, and a 2 minute video on a way to inappropriately initiate a friendly conversation.

Session 6: A Commercial about Making Friends, and Termination of Sessions


- Videos were my way of ending this in a fun way, and to get him to research and put thought into friendship skills. Jake's shy, and often prefers not to talk to others to avoid discomfort.
- Reviewed and critiqued videos with Jake. Reinforced the techniques he said were good (eye contact, handshake, asking people about something they're interested in), and laughed with him about his second video in which he acted like a creepy villain and chased his sister around their front yard begging "*Be my friend! Pleeeeze!*"
- **Recommendations to parents:**
 1. Continue with stress indicators, with particular attention to strategies helpful in alleviating high-stress numbers (**continuing with positive results**);
 2. Consider enrolling in drama classes. Watching Jake act as a teacher provided an epiphany to me. He is a natural actor, and it's a cool way to meet others. (**Since done, and he's loving it**);
 3. Seek counseling for an unusually high level of anxiety. Gave Jake's parents the name and telephone number of a therapist who specializes in this area and sees several children and adults with Asperger's syndrome (**Call was made and first session set up**)
 4. Become involved in a skills group that will provide (a) opportunities for social skill learning and development, and (b) a community in which Jake can connect (**begun, starts 10/3/11**)

Termination (continued)

5. Use existing workbooks and homemade social stories to provide information needed and to reduce anxiety, with thought given to ensuring the work isn't too childish



Strengths of This Model

- ▶ For Jake, the bond that was established from the 1:1 attention was important for his shyness and his confidence. He needed someone besides family to help him feel of value.
 - ▶ Jake's family really bought into this process, and ensured he and they did most of the homework asked of them
 - ▶ The skills Jake learned were generalized to school and to the community. They were functional, and they gave him an option he didn't realize he had.
 - ▶ The quick improvements of the single need were reinforcing to Jake and his family. They saw results, and were hopeful as a result
 - ▶ As he became more communicative and happier, other behavior, such as tantrums, became less severe
- 

Questions ?



STOP TALKING

You never make sense anyway.